S(CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/51	
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) ISSA FOR CONGRESS				
Α.	Full Name (Last, First, Middle Initial) ANTHONY P LAKAVAGE Mailing Address 77 PARK HILL AVE City SAN FRANCISCO	THONY P LAKAVAGE ling Address 77 PARK HILL AVE State Zip Code			
	FEC ID number of contributing federal political committee. Name of Employer GILEAD SCIENCES Receipt For: 2006 Primary X General Other (specify)		n DR GOVERNMENT AFFAIRS cycle-to-Date ▼	CONTRIBUTION Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
3.	Full Name (Last, First, Middle Initial) CHARMAYNE MACON Mailing Address 5459 MITTENDORF LANE			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City ALEXANDRIA	State Zip Code VA 22315		Transaction ID: SA11A1.17067 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00 CONTRIBUTION	
	Name of Employer THE FERGUSON GROUP Receipt For: 2006 Primary X General Other (specify) ▼	Occupation EXECUT Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Э.	Full Name (Last, First, Middle Initial) GRAHAM W MCCRACKEN Mailing Address 2618 VICTORIA DR	HAM W MCCRACKEN		Date of Receipt 0 6 0 1 2 0 0 6	
	City LAGUNA BEACH	State CA	Zip Code 92651	Transaction ID: SA11A1.16910 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer INFORMATION REQUESTED	Employer ATION REQUESTED Occupation		CONTRIBUTION Limit Increased Due to Opponent's	
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)	
SUBTOTAL of Receipts This Page (optional)					
TOTAL This Period (last page this line number only)					